

# Supporting the Sustainability of Local School Wellness Councils

COVID-19 WELLNESS NEEDS ASSESSMENT

## Evaluation Survey Results and Recommendations for School Years 2019–2020 and 2020–2021

Maryland's Largest School District

**MONTGOMERY COUNTY PUBLIC SCHOOLS**



## Acknowledgments

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## I. Introduction and Purpose

**SINCE 2016, THE INSTITUTE FOR PUBLIC HEALTH INNOVATION (IPHI) HAS PARTNERED WITH MONTGOMERY COUNTY PUBLIC SCHOOLS (MCPS)** to build the capacity of Local School Wellness Councils (LSWC) to reduce childhood obesity and improve student wellness. Under the direction of the MCPS Director of Student Wellness Initiatives and the grant-funded Local School Wellness Coordinator, LSWCs have focused on creating and maintaining a healthy school environment by enhancing wellness policy implementation and monitoring.

Due to the COVID-19 pandemic and as grant-funding for the LSWC initiative begins to culminate, project partners have responded to the changing needs of the local school wellness councils and school environment.

Since March 2020, the COVID-19 pandemic has shifted the dynamics of the work and impacted the focus of MCPS schools. The project team had to pivot outreach efforts from in-person to virtual outreach and modify expectations for the work, given new challenges faced by schools learning how to teach and interact virtually with their students.

Another challenge to the project is that technical and coordination support by IPHI and grant funding will end March 2021. Since 2016, this initiative has been funded through Trinity Health's Transforming Communities Initiative and the Healthcare Initiative Foundation. Throughout the partnership, resources leveraged by IPHI have included—

- technical assistance and mini-grants to support the development of LSWCs,
- funding for a part-time LSWC coordinator to support the implementation of action plans, and
- development of tools for sustainability and evaluation.

Over the past four years, IPHI leveraged more than \$350,000 in funding to support LSWCs.

Funding and in-kind resources were provided by [Trinity Health](#), the [Maryland Community Health Resources Commission](#), the [Morris & Gwendolyn Cafritz Foundation](#), the [Healthcare Initiative Foundation](#) and [Kaiser Permanente of the Mid-Atlantic States](#).

Given these changes and challenges posed to the project, IPHI and MCPS set out to explore opportunities to support LSWCs during this unprecedented period. IPHI and MCPS worked with our evaluation partner, Community Science, to develop a COVID-19 Wellness Needs Assessment. The purpose of the survey was to assess how active schools have been engaged in health and wellness efforts, particularly within the virtual learning environment, and gather information to inform current and future supports MCPS can provide to schools and LSWCs to best meet schools' health and wellness needs.

This report summarizes the successes, challenges, and lessons learned from efforts to support MCPS LSWCs this past year and offers recommendations to support the future work of the LSWCs in this ever-changing environment.

## II. Responding to COVID-19

While in-school learning halted visits to schools due to COVID-19, the Director of School Wellness Initiatives Marla Caplon and the Local School Wellness Coordinator Ilana Sambuco shifted their strategy from high-touch, in-person activities to more broad-based, virtual support with school wellness leads. Based on feedback from LSWCs, MCPS developed two training opportunities that focused on mental health, mindfulness, and student engagement. The first training was held on October 21, 2020, and was attended by 148 participants. It was customized to support personal emotional needs, resilience, and promising practices for success in the virtual classroom. In addition, grant funding was used to provide attendees with mindfulness cards that could be used in the virtual classroom.

The second training was conducted on February 10, 2021, and was attended by 20 participants. The training provided participants with ways to create an equitable and inclusive culture for physical activity in the classroom; actionable strategies for integrating physical activity for in-person, virtual, and hybrid formats; approaches to using physical activity as a strategy to support social interaction among students in a virtual setting; and ways to partner with families to extend physical activity beyond the school day.

## III. Survey Results

### Purpose of the Survey and Methodology

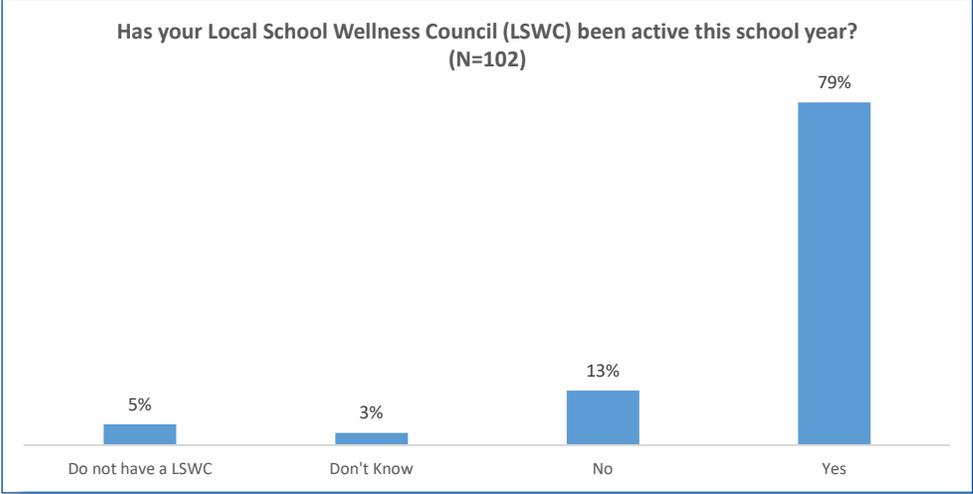
In winter 2020, Community Science, Inc., the external evaluation team, conducted an online survey with all MCPS schools. The evaluation team revised the version of the LSWC survey that has been implemented yearly since 2018. The survey items were modified this year to reflect the current virtual-learning environment. In addition, survey items were added to assess schools' ongoing learning and capacity-building needs, which will help MCPS plan ahead for ongoing and future training and technical assistance supports.

All 206 MCPS schools were invited to participate in the online survey. This is a departure from the methodology used in previous years. Given COVID-19 restrictions, MCPS has provided fully virtual supports and services to schools, using a broader outreach and capacity-building approach this year instead of the more individualized services of previous years. Additionally, as this survey also served to assess current, ongoing, and future needs, the survey-recruitment approach matched MCPS's broad outreach effort.

A total of 102 schools participated in the online survey, and responses are summarized below. Multi-year data are also provided, if available. However, given varying survey sampling approaches used each year and the unique challenges brought on by the COVID-19 pandemic, direct comparisons between years for many of the items may not be feasible or significantly informative.

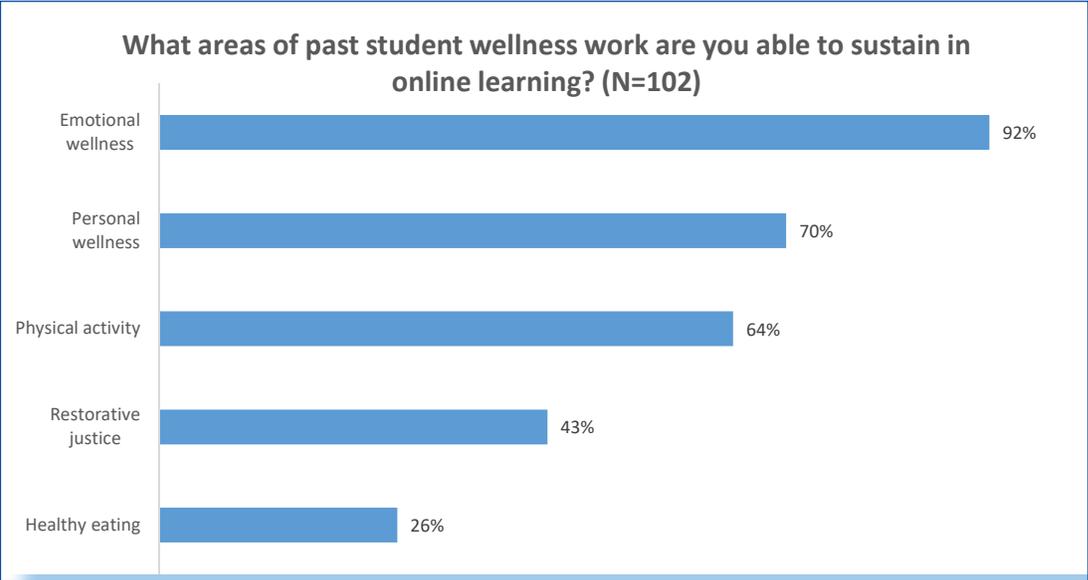
## Status of Local School Wellness Councils

Schools were asked to report if their LSWC has been active this school year. As shown below, the majority (79%) indicated that their LSWC has been active during the virtual-learning environment. A smaller number indicated that their LSWC has been inactive (13%), while 5 percent reported that they do not have an LSWC.



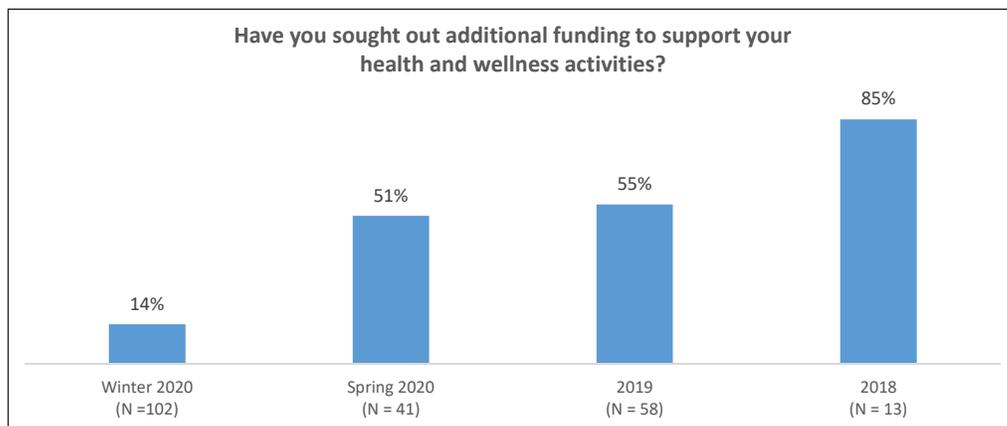
## Sustaining Past Student Wellness Work

Schools reported on the areas of past wellness work that they have been able to sustain in the virtual-learning environment. The response options were based on MCPS’s essential wellness areas. The majority of schools (92%) indicated that they are still able to implement efforts to promote emotional wellness. Most schools also are able to continue to support personal wellness (72%). Only 26 percent of schools reported healthy eating as an ongoing wellness area this year.



## Additional Funding for Health and Wellness Activities

Schools indicated if they have sought out additional funding to support their health and wellness activities. Only 14 percent of this year’s respondents indicated that they have sought additional funding. Sources of additional funding mentioned by schools include local church groups, grants, local organizations, and nonprofit organizations.



## Health and Wellness Participation by School Stakeholders

Schools also answered questions related to the members involved in health and wellness efforts (including members of their LSWC). The majority of schools reported high levels of involvement from teachers and administrators (consistent with involvement in previous years). Additionally, a much higher level of involvement from students was reported this year.

	Winter 2020 (N = 102)	Spring 2020 (N=41)	2019 (N = 58)	2018 (N = 11)
Teachers	94%	100%	100%	100%
Administrators	91%	83%	81%	73%
Parents	30%	39%	41%	55%
Students	52%	24%	22%	18%
Other (e.g., before- and after-care staff, school health technician, counselor)	26%	27%	22%	9%
Community	25%	32%	16%	27%

## Additional Supports

Schools also reported on specific health and wellness training topics that would be immediately useful to schools and also shared the feedback on what their schools need to be successful to achieve their health and wellness goals more broadly.

### Specific health and wellness training topics that would be useful to receive in the next few months

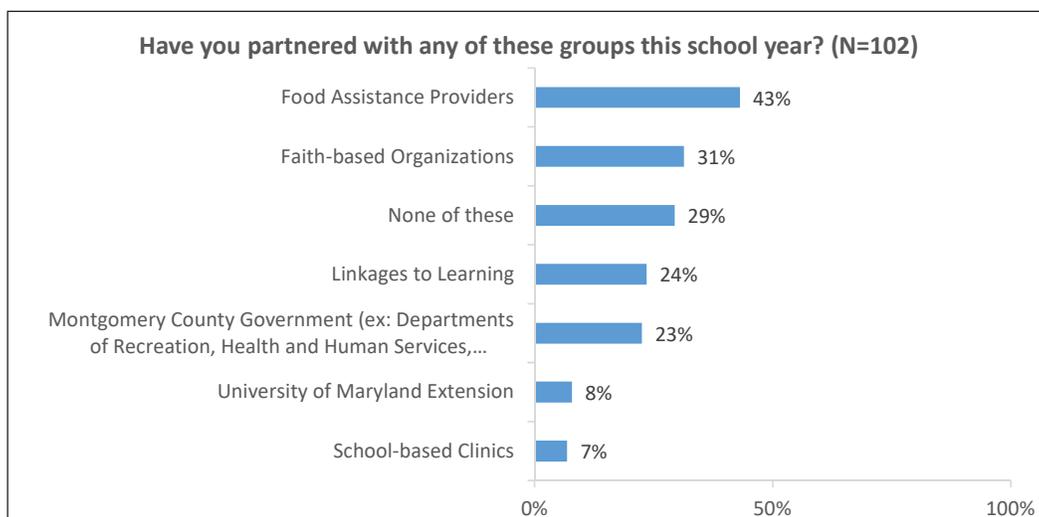
- Schools reported that they would like additional training in how to support the wellness of their students (n = 30), staff (n = 16), and parents (n = 10).
- Schools primarily requested training that would help them support mental well-being and health through mindfulness exercises, trauma-informed strategies, and creating opportunities for virtual connection (n = 51).
- Schools also would like to receive training to support physical health through topics such as healthy eating and exercise (n = 26).
- Many schools (n = 25) would like training in how to encourage wellness in the current virtual setting. A small number of schools (n = 7) requested future training in how to support students and staff to readjust to in-person learning.

### What schools need to be successful to achieve their health and wellness goals, given the current circumstances affecting students

- Schools reported that they would like additional funding to pay for additional staff and resources for the school and to provide incentives for wellness activities (n = 56).
- Schools also reported that it would be beneficial for staff to receive more training in areas such as trauma-informed responses, equity, and how to engage students effectively with technology (n = 25).
- Schools would like to provide staff, students, and the community with more wellness opportunities, such as seminars, physical-activity challenges, and virtual social opportunities (n = 20).
- Schools would like to support their students and families by providing them with resources directly, such as food, clothing, and technology (n = 9).

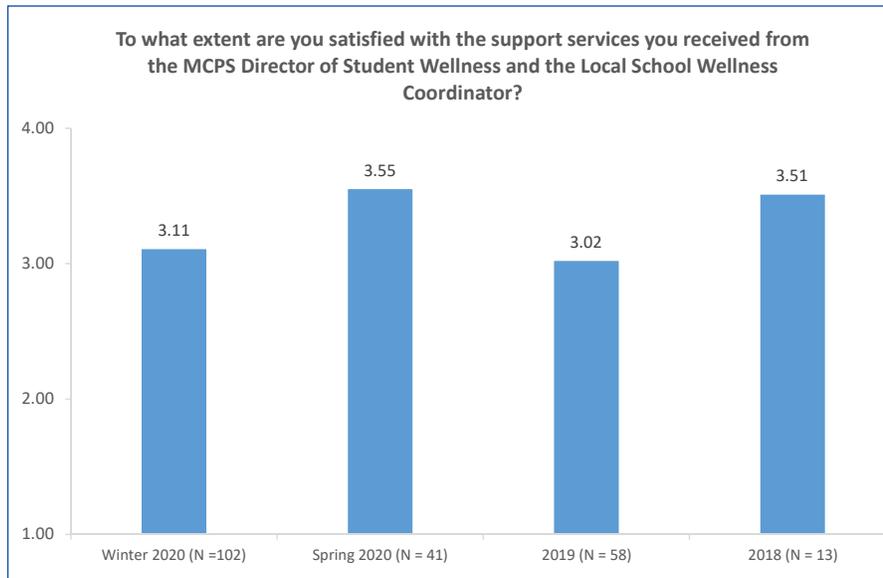
## Partnerships

Schools were asked to indicate which groups, if any, they had partnered with during the school year. Almost half of schools (43%) indicated they had partnered with food-assistance providers. Only 7 percent reported partnering with school-based clinics. Additionally, one-third of schools indicated that they have not partnered with any of the organizations listed in the survey.



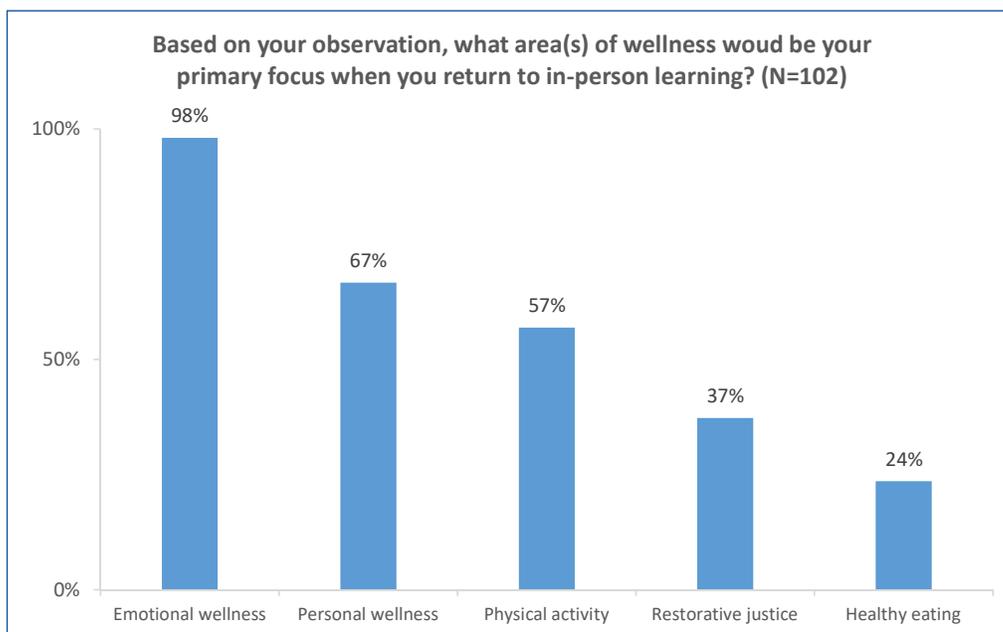
## Support Satisfaction

Schools were asked to provide feedback on the support they have received from MCPS to create and maintain their health and wellness efforts. Ratings remain consistent, with responses averaging 3.11 out of 4 across the 102 respondents.



## Primary Focus for In-person Learning

Schools reported on what they foresee as their primary wellness focus(es) when they are able to return to in-person learning. Responses remain consistent with what schools indicated they have been able to sustain during online learning. Almost all schools (98%) reported that emotional wellness will be a primary focus. Personal wellness is the next prioritized area (67%). One quarter of schools (24%) indicated that healthy eating will be a primary focus when they return to in-person learning.



## Accomplishments and Challenges

Schools reported on their health and wellness accomplishments for the past year:

- Many schools were proud of the level of participation in their various health programs (n = 50). These included fitness challenges, mindfulness sessions, and workshops. The activities also included both virtual and outdoor opportunities.
- Schools were able to address families' basic needs and provide them with food and other resources (n = 27).
- Schools also reported that they felt their ability to maintain connections with their students and families (through home visits/walk-bys, virtual chat-and-chew sessions, and other virtual events) was an accomplishment (n = 19).
- Some schools felt a sense of accomplishment from maintaining attendance levels, which has been a challenge for schools across the nation (n = 7).

Schools also reported on what they saw as significant challenges during this past year:

- Many schools have found it challenging to adapt their health and wellness goals and initiatives to a virtual format (n = 28).
- Schools also reported that it has been challenging to engage families, both to provide them with supports and to reach students who have not been attending class (n = 24).
- Some schools reported that a lack of resources (including funding, staffing, and time) was a major barrier to addressing student and staff needs and well-being.
- Many schools were also concerned with their ability to create a sense of connection (n=11) and support the mental health of students, staff, and families (n = 11).

## IV. Recommendations and Next Steps

The Montgomery County Public Schools Wellness Regulation JPG-RA, ***Wellness: Physical and Nutritional Health***, requires that every school have a Local School Wellness Council and that wellness is included in their school improvement plan (SIP). It is known that supporting and enhancing student wellness is vital to academic success and optimum health. We have found that the local school wellness council serves as an unparalleled lead to determine ways to enhance student wellness at a specific school. The results that we have seen are due to the unique school action plans that LSWCs were empowered to complete. In order to ensure compliance with the regulation, we recommend the following next steps:

- **Continue connection with the principal and Local School Wellness Council in each school.**  
The Local School Wellness Councils are the gateway for health and wellness goals to be accomplished at the school level. LSWCs are organized by the Principal/administration team of each school. Members may change each year, so having contact with the Principal is vital. The Principals are the "CEO" of the school; in many instances, they set the tone and bring the energy to staff to support wellness. Each LSWC creates wellness goals specific to the students in that school community. Encouraging these councils to develop and flourish will keep schools accountable to complete wellness-related goals.
- **Make grant funds available for school wellness councils.**  
For the past several years, project partners have leveraged grant funding to allow all schools to apply for mini-grants. Moving forward, we recommend offering between \$100 to \$1,000 to school wellness teams to successfully identify and reach their wellness goals. Funding amounts vary based on available funding and the amount required to support a goal in their wellness action plan. These funds will allow school wellness teams to purchase resources and equipment that support specific wellness goals for

their school. Overall, these grant funds have spurred energy and enthusiasm around enhancing student wellness.

- Continue expansion of health and wellness to include mental health, well-being, and addressing basic needs such as food security.

Consider resources and supports for LSWCs to think and act more broadly and comprehensively. We recommend using the ***Whole School, Whole Community, Whole Child (WSCC) model*** by the Centers for Disease Control and Prevention as a guiding framework for addressing health in schools. The WSCC model is student-centered and emphasizes the role of the community in supporting the school, the connections between health and academic achievement, and the importance of evidence-based school policies and practices. MCPS should be responsive to the wellness needs of the schools and communities. Food security was one of the top issues identified in the survey that has been exacerbated by COVID-19. Addressing basic needs such as food is critical for the wellness of students.

- Develop short-term and long-term wellness plans to ensure necessary supports, resources, and actions are in place to mitigate the harmful impacts of COVID-19 on student health and wellness.

The COVID-19 pandemic requires schools to engage in proactive, continuous planning to address current, emergent, and potential future wellness needs and priorities for their students. The health and wellness needs will vary as schools transition to in-person learning and as schools face long-term impacts of COVID-19, not just on students' educational achievement but also on their physical and social-emotional health. Proactive, well-thought-out planning now will help MCPS, and each school, meet current needs and anticipate future challenges. Specifically, each school should develop a plan to address wellness in the current virtual environment, determine what is needed in a hybrid environment, and plan for the future when students are fully back in person. Individual school plans will ensure that actions fit the context, settings, needs, and strengths of each school.

- Explore new or expand collaborations within and outside of MCPS to promote stronger integration of services and leverage resources to support health and wellness.

Partner with agencies outside of MCPS, such as Kaiser Permanente, the Alliance for a Healthier Generation, and the Action for Healthy Kids and other nonprofit organizations, such as the Institute for Public Health Innovation, that leveraged more than \$350,000 in funding to support school wellness. There are also opportunities to strengthen relationships with other Montgomery County agencies. For example, greater alignment and coordination with the Montgomery County ***Department of Transportation (MCDOT) Safe Routes to School (SRTS)*** department could ensure that schools work toward health, wellness, and safety in a collaborative and seamless manner. Over the past two years, project partners have connected more than 30 LSWCs with the Safe Routes to Schools Initiative from MCDOT. The existing local school wellness councils are a natural hub within each school from which to work closely with MCDOT SRTS. This collaboration can help to weave together various opportunities to increase physical activity opportunities for students, including walking and biking to school and all the necessary supports to achieve this (e.g., regular SRTS to assessments, education and outreach, and physical improvements to streets and sidewalks).

## V. Conclusion

Throughout the past four years, the project team has successfully implemented local school wellness councils in 102 schools, reaching 81,016 students, and developed the first School Wellness Toolkit in the state of Maryland that guides schools in how to create a local school wellness council. Despite COVID-19, most of the LSWCs remained active and continued to request training opportunities and resources. Future school years may look drastically different due to the pandemic; therefore, MCPS should consider continuing to provide technical assistance, training, and resources to LSWCs to ensure the sustainability of their health and wellness efforts.

To learn more about the efforts of the LSWCs, please visit our [website](#).



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